U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

		<u> </u>	CTION A	PROPERTY	INFORM	ATION	FOR IN	SURANCE COMPANY USE
A1. Building Owner's Nam	ne Fleming						Policy N	lumber:
Surf Street						Compa	ny NAIC Number:	
City Waveland			Ä	State MS Z	IP Code 3	9576		
A3. Property Description (Lots 7,8,9,10,19,20,21 & 22	Lot and Block Nu 2 Block 9 Wavela	umbers, Tax Parc and Park S/D	el Number,	Legal Descriptio	n, etc.)		1440000	
 A4. Building Use (e.g., Ref A5. Latitude/Longitude: La A6. Attach at least 2 photo A7. Building Diagram Num A8. For a building with a cia a) Square footage of b) Number of perman or enclosure(s) with c) Total net area of flod d) Engineered flood or 	it. <u>NA</u> Long. <u>NA</u> graphs of the bunder <u>5</u> rawlspace or enderawlspace or enderawlspace or endert flood opening hin 1.0 foot above od openings in <i>i</i>	uilding if the Certif closure(s): nclosure(s) gs in the crawlspa e adjacent grade	Horizontal I ficate is beir NA ace NA NA	Datum: NAD ng used to obtain	1927 🔀 flood insur 9. For a b a) Sq b) Nu with c) Tot	ance. Juilding with an atta Juare footage of atta	ached gar flood ope adjacent o openings	rage <u>NA</u> sq ft enings in the attached garage grade <u>NA</u>
	SEC	TION B - FLOO	DD INSUR	ANCE RATE N	AP (FIRI	M) INFORMATIC	N	
B1. NFIP Community Name Waveland 285262	e & Community N	Number	B2. Cou	unty Name k			B3. Stat MS	е
B4. Map/Panel Number 28045C-0344	B5. Suffix D	B6. FIRM Inde 10/16/200		B7. FIRM P Effective/Revise 10/16/200	ed Date	B8. Flood Zone(s) AE		Base Flood Elevation(s) (Zone AO, use base flood depth)
10. Indicate the source of		Elevation (BFE) d	ata or base			B9.		
☐ FIS Profile		☐ Community [r/Source: _			
11. Indicate elevation datu12. Is the building located Designation Date:	in a Coastal Barı					Other/Source: cted Area (OPA)?		☐ Yes
	SECTIO	N C – BUILDIN	G ELEVA	TION INFORM	ATION (S	URVEY REQUI	RED)	
1. Building elevations are b	Lance and the Control of the Control		001000000000000000000000000000000000000					
*A new Elevation Certific	cate will be requi A30, AE, AH, A (puilding diagram <u>E</u> n used for the ele	(with BFE), VE, V specified in Item evations in items a	iction of the 11-V30, V (v A7. In Puerl Vertic a) through h	building is comp vith BFE), AR, Al to Rico only, ente cal Datum: <u>NAVI</u>) below. □ NGV	lete. R/A, AR/AE er meters. D1988 (Epc	och 2009.55) I NAVD 1988 🏻 C	AH, AR/A	rce:
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*A new Elevation Certific 2. Elevations – Zones A1–, below according to the b Benchmark Utilized: CO Indicate elevation datum Datum used for building a) Top of bottom floor (ir b) Top of the next higher	cate will be requinate will be requinate. A30, AE, AH, A (building diagram E and the election of the election	red when constru (with BFE), VE, V specified in Item evations in items a be the same as t ent, crawlspace, o	ction of the 1-V30, V (v A7. In Pueri Vertic a) through h hat used for	building is comp vith BFE), AR, Al to Rico only, ente cal Datum: <u>NAVI</u>) below. NGV r the BFE.	lete. R/A, AR/AE er meters. D1988 (Epc	E, AR/A1-A30, AR/ och 2009.55) I NAVD 1988 ロ C	AH, AR/A	O. Complete Items C2.a-h
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ELEVATION CENTIFICATE, P	aye z			
	copy the corresponding information from			FOR INSURANCE COMPANY USE
Building Street Address (including Ap 315 Surf Street	t., Unit, Suite, and/or Bldg. No.) or P.O. Route and	Box No.		Policy Number:
City Waveland	State MS	ZIP Code 39	576	Company NAIC Number:
SECTION	D – SURVEYOR, ENGINEER, OR ARCHI	TECT CERT	IFICATION (C	ONTINUED)
Copy both sides of this Elevation Cert	ificate for (1) community official, (2) insurance age	ent/company, a	and (3) building o	owner.
Comments Residence is under cons	truction.			
2				
Signature		03/15/2014		
SECTION E - BUILDING ELE	VATION INFORMATION (SURVEY NOT R	EQUIRED) F	OR ZONE AO	AND ZONE A (WITHOUT BFE)
E1. Provide elevation information for grade (HAG) and the lowest adjust a) Top of bottom floor (including b) Top of bottom floor (including b) Top of bottom floor (including E2. For Building Diagrams 6–9 with (elevation C2.b in the diagrams) E3. Attached garage (top of slab) is	basement, crawlspace, or enclosure) is	In Puerto Ric show whethe fee fee fee fee fee fee fee fee fee fe	o only, enter met r the elevation is et meters [et meters [9 (see pages 8–re or below the HAG.	above or below the highest adjacent above or below the HAG. above or below the HAG. above or below the LAG. 9 of Instructions), the next higher floor he HAG.
E5. Zone AO only: If no flood depth	d/or equipment servicing the building is number is available, is the top of the bottom floor Unknown. The local official must certify this info	elevated in ac	cordance with th	oove or ☐ below the HAG. ne community's floodplain management
SECTION	F – PROPERTY OWNER (OR OWNER'S F	REPRESENT	TATIVE) CERT	IFICATION
The property owner or owner's authorior Zone AO must sign here. The stater	zed representative who completes Sections A, B, ments in Sections A, B, and E are correct to the be	and E for Zon	e A (without a FE vledge.	EMA-issued or community-issued BFE)
Property Owner's or Owner's Authorize	ed Representative's Name			
Address	City		State	ZIP Code
Signature	Date		Teleph	one
Comments				
:				☐ Check here if attachments
	SECTION G - COMMUNITY INFORM	IATION (OP	TIONAL)	
he local official who is authorized by law	or ordinance to administer the community's floodpl	ain manageme	ent ordinance car	complete Sections A, B, C (or E), and G
	applicable item(s) and sign below. Check the measures taken from other documentation that has been			
is authorized by law to certify e	elevation information. (Indicate the source and da	te of the eleva	ition data in the 0	Comments area below.)
	d Section E for a building located in Zone A (witho			ty-issued BFE) or Zone AO.
	ns G4–G10) is provided for community floodplain r			
G4. Permit Number	G5. Date Permit Issued	G6. Date C	ertificate Of Com	pliance/Occupancy Issued
77. This permit has been issued for: 88. Elevation of as-built lowest floor (in	☐ New Construction ☐ Substantial Imp			Duta
69. BFE or (in Zone AO) depth of flood		∐ feet □ feet	☐ meters	Datum
10. Community's design flood elevation		☐ feet	☐ meters	Datum
				Datum
Local Officiai's Name	Title			
Community Name	Tele	phone		
Signature	Date			
Comments				45 S
				Check here if attachments.

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

EL.

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1–9.

SECTION A – PROPERTY INFORMATION

OMB No. 1660-0008
Expiration Date: July 31, 2015

FOR INSURANCE COMPANY USE

SECTION A – PROPERTY INFORMATION FOR INSURANCE COMPANY L					
A1. Building Owner's Name Fleming Policy Number:					
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. Company NAIC Number:					
City Waveland State MS ZIP Code 39576					
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lots 19 & 20 Block 9 Waveland Park S/D	_				
or enclosure(s) within 1.0 foot above adjacent grade NA within 1.0 foot abo	attached garage NA sq ft nent flood openings in the attached garage we adjacent grade NA ood openings in A9.b NA sq in openings? Yes No				
	HON				
B1. NFIP Community Name & Community Number Waveland 285262 B2. County Name Hancock	B3. State MS				
B4. Map/Panel Number 28045C-0344 B5. Suffix D B6. FIRM Index Date 10/16/2009 B7. FIRM Panel Effective/Revised Date 10/16/2009 AE	B9. Base Flood Elevation(s) (Zone AO, use base flood depth) 19' *				
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in Item B9. FIS Profile FIRM Community Determined Other/Source: B11. Indicate elevation datum used for BFE in Item B9: NGVD 1929 NAVD 1988 Other/Source B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA Designation Date:	Manual Ma				
SECTION C – BUILDING ELEVATION INFORMATION (SURVEY REC	(UIRED)				
C1. Building elevations are based on: ☐ Construction Drawings* ☐ Building Under Construction* *A new Elevation Certificate will be required when construction of the building is complete. C2. Elevations – Zones A1–A30, AE, AH, A (with BFE), VE, V1–V30, V (with BFE), AR, AR/A, AR/AE, AR/A1–A30, below according to the building diagram specified in Item A7. In Puerto Rico only, enter meters. Benchmark Utilized: COE Vertical Datum: NAVD1988 (Epoch 2009.55) Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevations in items a) through h) below. ☐ NGVD 1929 ☑ NAVD 1988 [Indicate elevation datum used for the elevation datum use	☐ Finished Construction AR/AH, AR/AO. Complete Items C2.a–h				
Datum used for building elevations must be the same as that used for the BFE.	neck the measurement used.				
a) Top of bottom floor (including basement, crawlspace, or enclosure floor) b) Top of the next higher floor c) Bottom of the lowest horizontal structural member (V Zones only) NA.					
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG)	☐ feet ☐ meters				
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments)	☐ feet ☐ meters ☐ feet ☐ meters ☐ feet ☐ meters				
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) 15.5	☐ feet ☐ meters				
d) Attached garage (top of slab) e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment and location in Comments) f) Lowest adjacent (finished) grade next to building (LAG) g) Highest adjacent (finished) grade next to building (HAG) h) Lowest adjacent grade at lowest elevation of deck or stairs, including structural support NA. NA. NA. NA. NA. NA. NA. NA	feet				

FOR INCLIDANCE COMPANY
FOR INSURANCE COMPANY USE Policy Number:
Company NAIC Number:
FION (CONTINUED)
building owner.
ONE AO AND ZONE A (WITHOUT BFE)
or LOMR-F request, complete Sections A, B, enter meters. evation is above or below the highest adjacent meters above or below the HAG. meters above or below the LAG. pages 8–9 of Instructions), the next higher floor below the HAG. G. ers above or below the HAG. ce with the community's floodplain management
E) CERTIFICATION
hout a FEMA-issued or community-issued BFE)
State ZIP Code
Telephone
_
Check here if attachmer
AL)
nance can complete Sections A, B, C (or E), and is G8–G10. In Puerto Rico only, enter meters.
y a licensed surveyor, engineer, or architect who
community-issued BFE) or Zone AO.
es.
e Of Compliance/Occupancy Issued
ers Datum
ers Datum
ers Datum

U.S. DEPARTMENT OF HOMELAND SECURITY FEDERAL EMERGENCY MANAGEMENT AGENCY National Flood Insurance Program

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1-9.

OMB No. 1660-0008

Expiration Date: July 31, 2015

SECTION A – PROPERTY INFORMATION FOR INSURANCE COMPANY I					INSURANCE COMPANY USE			
A1. Building Owner's Name RICK FLEMING JOB#21138-15 Policy Number:					Number:			
A2. Building Street Address 315 SURF STREET	s (including Apt., U	Jnit, Suite, and/or	Bldg. N	o.) or P.O. R	oute and Box No).	Comp	eany NAIC Number:
City WAVELAND				State MS	ZIP Code 3	9576		
A3. Property Description (LOTS 19 & 20, BLOCK 9, N			Number	, Legal Desc	iption, etc.)			
A4. Building Use (e.g., Re A5. Latitude/Longitude: La A6. Attach at least 2 photo A7. Building Diagram Num A8. For a building with a c a) Square footage of b) Number of perman or enclosure(s) wit c) Total net area of flo	t. 30-16-42.0 Lon graphs of the build ber 5 rawlspace or enclocrawlspace or encloent flood openings in 1.0 foot above abod openings in A8 penings?	g. <u>-89-22-58.3</u> Ho ing if the Certifical sure(s): osure(s) in the crawlspace adjacent grade .b Yes 🔲 No	N/A N/A N/A N/A	Datum: ing used to of sq ft sq in	NAD 1927 Sotain flood insur A9. For a b a) Squ b) Nur with c) Tot d) Eng	ance. uilding with an atta uare footage of atta nber of permanent in 1.0 foot above a al net area of flood jineered flood ope	ached g t flood o adjacen I openin nings?	arage <u>N/A</u> sq ft penings in the attached garage t grade <u>N/A</u>
	SECTION	ON B - FLOOD	INSU	RANCE RA	TE MAP (FIRM	I) INFORMATIC	N	
B1. NFIP Community Name 285262 WAVELAND	e & Community Nu	mber	B2. Co	ounty Name OCK			B3. St MS	ate
B4. Map/Panel Number 28045C0344	B5. Suffix D	B6. FIRM Index I 10/16/09	Date	Effective/R	M Panel evised Date 6/09	B8. Flood Zone(s) AE	В9	. Base Flood Elevation(s) (Zone AO, use base flood depth) 19
FIS Profile 311. Indicate elevation datu 312. Is the building located Designation Date:	m used for BFE in		VD 1929 em (CBI) <u> </u>		Other/Source:		☐ Yes
	SECTION	C – BUILDING	ELEV	ATION INFO	RMATION (S	URVEY REQUI	RED)	
*A new Elevations are I *A new Elevation Certific Elevations – Zones A1– below according to the I Benchmark Utilized: CC Indicate elevation datum Datum used for building	cate will be require A30, AE, AH, A (w ouilding diagram sp DE i used for the eleva	ith BFE), VE, V1– ecified in Item A7 ations in Items a) t	on of the V30, V ('. In Pue Vert through	e building is o (with BFE), A rto Rico only ical Datum: h) below. □	R, AR/A, AR/AE enter meters. NAVD 1988(Epo	i, AR/A1–A30, AR/ och2009.55) NAVD 1988 □ C	/AH, AR	Finished Construction 2/AO. Complete Items C2.a-h burce:
a) Top of bottom floor (in	cluding basement	crawlspace or e	nclosure	e floor)	<u>24.5</u>	Oricor	⊠ fee	
b) Top of the next highe		, oramopado, or o	noiocare	3 11001)	N/A	·	⊠ feet	
c) Bottom of the lowest		I member (V Zon	es only)		N/A	<u> </u>	⊠ feet	t meters
d) Attached garage (top			1		<u>N/A</u>	·	⊠ feet	
 e) Lowest elevation of m (Describe type of equ 			bullaing	3	<u>23.3</u>		⊠ feet	t meters
f) Lowest adjacent (finis					<u>14.4</u>		⊠ feet	t meters
g) Highest adjacent (finish)h) Lowest adjacent grad	i 50		s, includ	ling structural	15.5 support 14.4			
	SECTION	D - SURVEYO	R, EN	GINEER, O	R ARCHITEC	CERTIFICATION	ON	
This certification is to be signiformation. I certify that the I understand that any false Comment Check here if attachments.	information on this statement may be p as are provided on l	s Certificate repre ounishable by fine	sents m or impr Were I	y best efforts isonment und	to interpret the ler 18 U.S. Code ngitude in Secti	data available. e, Section 1001. on A provided by a	7	COLOR DE LA COLOR
Certifier's Name J. Michael	Cassady, PLS	W W. W		Lice	nse Number 1	629		S SURVEYOR ?
Title Land Surveyor	(Company Name	Cassad	ly & Associat	es, Inc.			LS 1629
Address 1714 22 nd Avenue	9 (City Gulfport		Sta	e MS ZIP C	ode 39501		37
Signature/	_ [ate June 15, 20	15	Tele	phone (228) 8	96-7155		OF M 155 10
Also 1)//						[

ELEVATION CERTIFICATE, page 2				
IMPORTANT: In these spaces, copy the corresponding in	formation from Sec	tion A.	FOR	INSURANCE COMPANY USE
Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) 315 SURF STREET	or P.O. Route and Box	No.	Policy	y Number:
City WAVELAND	State MS ZIP	Code 39576	Comp	pany NAIC Number:
SECTION D - SURVEYOR, ENGINE	ER, OR ARCHITEC	T CERTIFICATI	ON (CONTI	NUED)
Copy both sides of this Elevation Certificate for (1) community official,	, (2) insurance agent/co	mpany, and (3) b	uilding owner.	
Comments Confirm B8, B9 and C2a with local code office before an information purposes only. It is not intended to insure that the building address only. Equipment in Secton C2. e) is an A/C condenser on an address only.	g is located on a partici n elevated wood platfori	ulars legal parcel. m.	description lis The specific r	ted on this certificate is for reference is according to municipal
Signature	Date June	15, 2015		
SECTION E - BUILDING ELEVATION INFORMATION (S	SURVEY NOT REQU	IRED) FOR ZO	NE AO AND	ZONE A (WITHOUT BFE)
For Zones AO and A (without BFE), complete Items E1–E5. If the Ce and C. For Items E1–E4, use natural grade, if available. Check the m E1. Provide elevation information for the following and check the ap grade (HAG) and the lowest adjacent grade (LAG). a) Top of bottom floor (including basement, crawlspace, or encle b) Top of bottom floor (including basement, crawlspace, or encle E2. For Building Diagrams 6–9 with permanent flood openings provide (elevation C2.b in the diagrams) of the building is E3. Attached garage (top of slab) is Seet Feet E4. Top of platform of machinery and/or equipment servicing the bute Some AO only: If no flood depth number is available, is the top or ordinance? Yes No Unknown. The local official materials and call the call of the	peasurement used. In Propriate boxes to show osure) is osure) is ided in Section A Items	uerto Rico only, el w whether the elev feet m see and/or 9 (see p above or below the HAG feet metel ated in accordance	nter meters. vation is above neters above neters solution ages 8–9 of In below the HAG s. rs above o	e or below the highest adjacent ve or below the HAG. ve or below the LAG. astructions), the next higher floor G.
SECTION F – PROPERTY OWNER (CEDTIFIC	ATION
The property owner or owner's authorized representative who complet or Zone AO must sign here. The statements in Sections A, B, and E at Property Owner's or Owner's Authorized Representative's Name Address Signature Comments	tes Sections A, B, and less recorrect to the best of City Date	E for Zone A (with my knowledge.	State Telephone	ZIP Code
				Check here if attachments.
SECTION G - COMM	UNITY INFORMAT	ON (OPTIONAL	L)	
The local official who is authorized by law or ordinance to administer the confidence of this Elevation Certificate. Complete the applicable item(s) and sign below the information in Section C was taken from other documentation in Section C was taken from other documentation authorized by law to certify elevation information. (Indicate A community official completed Section E for a building locate The following information (Items G4–G10) is provided for completed Section E for a building locate G3.	w. Check the measurer ation that has been sigr the source and date of ed in Zone A (without a	nent used in Items ned and sealed by the elevation data FEMA-issued or c	G8–G10. In Post of the second second in the Commonity-issues to the commonity-issues to the community-issues to the community-	Puerto Rico only, enter meters. rveyor, engineer, or architect who ents area below.)
G4. Permit Number G5. Date Permit Issued				ce/Occupancy Issued
G7. This permit has been issued for: New Construction G8. Elevation of as-built lowest floor (including basement) of the building G9. BFE or (in Zone AO) depth of flooding at the building site: G10. Community's design flood elevation: Local Official's Name Community Name Signature Comments	[feet mete mete mete mete	ers Datu	m m m
		- Marine		Check here if attachments.

ELEVATION CERTIFICATE, page 3

Building Photographs

See Instructions for Item A6.

IMPORTANT: In these spaces, copy the corresponding information from Section A.

Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No. 315 SURF STREET

Policy Number:

City WAVELAND

State MS

ZIP Code 39576

Company NAIC Number:

FOR INSURANCE COMPANY USE

If using the Elevation Certificate to obtain NFIP flood insurance, affix at least 2 building photographs below according to the instructions for Item A6. Identify all photographs with date taken; "Front View" and "Rear View"; and, if required, "Right Side View" and "Left Side View." When applicable, photographs must show the foundation with representative examples of the flood openings or vents, as indicated in Section A8. If submitting more photographs than will fit on this page, use the Continuation Page.



June 15, 2015 Front View



June 15, 2015 Rear View

WAVELAND

2015 6588
Recorded in the Above
Deed Book & Page
06-26-2015 03:28:12 PM

NONCONVERSION AGREEMENT in othy A Kellar with Hancock County

CITY OF WAVELAND, MISSISSIPPI

This DECLARATION made this 26 day of	
· · · · · · · · · · · · · · · · · · ·	
WITNESSETH: WHEREAS, the Owner is the record owner of all that real property located at in the City of Waveland, Ms. in the County of Hancock, designated in the Tax Records as	
WHEREAS, the Owner has applied for a permit to place a structure on that property that has an enclosed area below the base flood elevation constructed in accordance with the requirements of Article No. 5, Section "B" paragraph 5 of the Waveland Floodplain Management Ordinance of Nur 325 and under Permit Number 17044.	nber
WHEREAS, the Owner agrees to record this DECLARATION and certifies and declares that the following covenants, conditions and restrictions are placed on the affected property as a condition granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Ownis heirs, personal representatives, successors, future owners, and assigns.	of /ner,
UPON THE TERMS AND SUBJECT TO THE CONDITIONS, as follows:	
1. The structure or part thereof to which these conditions apply is:	
2. At this site, the Base Flood Elevation is $\underline{\hspace{1cm} / \hspace{1cm} \mathcal{G}}$ feet above mean sea level, National Geodetic Vertical Datum.	0
3. Enclosed areas below the Base Flood Elevation shall be used solely for parking of vehicles, limit storage, or access to the building. All interior walls, ceilings and floors below the Base Flood Elevation shall be unfinished or constructed of flood resistant materials. Mechanical, electrical or plumbing devices shall not be installed below the Base Flood Elevation.	ed
4. The walls of the enclosed areas below the Base Flood Elevation shall be equipped and remain equipped with openings as shown on the Permit.	
5. The jurisdiction issuing the Permit and enforcing the Ordinance may take any appropriate legal action to correct any violation. Any alterations or changes from these conditions also may render th structure uninsurable or increase the cost for flood insurance.	е
6. A duly appointed representative of the City is authorized to enter the property for the purpose of inspecting the exterior and interior of the enclosed area to verify compliance with this Declaration. Such inspections will be conducted upon due notice to the Owner and no more frequently than once each year. More frequent inspections may be conducted if an annual inspection discovers a violation of the Permit.	e n
7. Other conditions:	
n witness whereof the undersigned set their hands and seals this 26th day of 201	<u>'</u> 5
(Seal)(Seal)	
Owner Witness	

State of Mississippi County of Hancock

who acknowledged that He executed and delivered the above and foregoing instrument.

Timothy A. Kellar Chancery Clerk By: Action Co.DCA

WINCERY COM

My Commission Expires Dec. 31, 2015

REAL PROPERTY APPRAISAL MASTER FILE INQUIRY 15:16:26
// 162J-0-10-260.000 ACCOUNT # 1490 YEAR APPRAISED:
ACREAGE TAX MTG REC JUD EXMPT
PARCEL SCT QTR TWN RNG DEEDED CALCULATED DIST CODE LOC DST CODE
$\frac{10}{10} = \frac{10}{10} = \frac{09}{14} = \frac{1450}{100} = \frac{0}{100} = \frac{1450}{100} = \frac{0}{100} = \frac{1}{100} $
xable: BEAT: 2 CITY: 2 SCHOOL: 1 SPECIAL: 0
OWNER CODE: Status: Status:
IN CARE OF: LAST UPDATED Date: 12/15/2006
MAILING ADDR: 321 SURF ST BY: SARAH
CITY/STATE/ZIP: WAVELAND MS 39576
PROPERTY STR ADDR: No315 Name: SURF ST
Contact: Town:
BRIEF DESCR: 7-10 & 19-22 BLK 9 WAVELAND PA RK
SUBDIVISION: 000000352 BLOCK: LOT#: LOT SIZE:
ZONED:
DATE BOOK PAGE DATE BOOK PAGE DATE BOOK PAGE
DEED INFO: 7/19/2006 2006 10408 8/16/1990 BB51 711
CD BENEFIT CD BENEFIT CD BENEFIT CD BENEFIT
SPL:
F4 - View Entire Legal F6 - Land Info F7 - Building Info F8 - Homestead
F12 - Exit F15 - Print PRC F20 - View Images
1 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

2015 6590 Deed Book & Page



Hancock County
I certify this instrument was filed on 06-26-2015 03:28:12 PM
and recorded in Deed Book 2015 at pages 6588 - 6590
Limpthy A Kellar
Chelia Daniels

WAVELAND

FLOODPLAIN VENTING AFFIDAVIT City of Waveland

I hereby acknowledge that City of Waveland
is issuing an Occupancy Certificate for the property known as: 315 Aug St
under Permit # 17044
in which required Floodplain Management Ordinance requirements have been met and a final inspection performed. At the time of inspection, vents and crawl space access doors used to meet the flood venting requirements of the Ordinance would allow the automatic entry and exit of floodwaters. I acknowledge that all openings designed to meet this requirement must be maintained as flood vents, and that the elimination or alteration of the openings in any way that would no longer allow the automatic entry and exit of flood waters would violate the Flood Damage Prevention Ordinance. Violations may incur civil penalties and possible court action. In addition, I acknowledge that alteration of the vents could result in greater risk to my property and personal safety in the event of a flood. Flood insurance claims may be denied, and flood insurance may not be available or flood insurance premiums increase if vents are altered.
As witness the hand and seal of the owner of the subject property this
27 day of June , 20/5.
Phrutu Sallyh - FENURICK R FREMWG
WITNESS OWNER (please print)
OWNER'S SIGNATURE